

1.) CORPORATION NAME:

**Reynolds American Inc.**

DUE DATE: **2/29/2012**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: **B.E.**

**AUTH IN VI**

**CORPORATION SERVICE COMPANY**

**Bank of America Center, 16th Floor**

**1111 East Main Street**

**RICHMOND, VA 23219**

SCC ID NO: **F1699141**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	400,000,000
PREFER	100,000,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

**RICHMOND CITY**

4.) STATE OR COUNTRY OF INCORPORATION:

**NC**

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 401 NORTH MAIN STREET

CITY/ST/ZIP: WINSTON SALEM, NC 27101-

7.) DIRECTORS AND PRINCIPAL OFFICERS:

All directors and principal officers must be listed. An individual may be designated as both a director and an officer.

☒

OFFICER

☒

DIRECTOR

NAME: DANIEL M DELEN  
TITLE: PRESIDENT/CEO  
ADDRESS: 401 NORTH MAIN ST  
CITY/ST/ZIP/CO: WINSTON-SALEM, NC 27101-

☒

OFFICER

☐

DIRECTOR

NAME: MCDARA P FOLAN, III  
TITLE: SVP/DGC/SEC  
ADDRESS: 401 NORTH MAIN ST  
CITY/ST/ZIP/CO: WINSTON-SALEM, NC 27101-

☒

OFFICER

☐

DIRECTOR

NAME: PATRICK Z MESSICK  
TITLE: ASST SECRETARY  
ADDRESS: 401 NORTH MAIN ST  
CITY/ST/ZIP/CO: WINSTON-SALEM, NC 27101-

☒

OFFICER

☐

DIRECTOR

NAME: DANIEL A FAWLEY  
TITLE: SVP/TREAS  
ADDRESS: 401 NORTH MAIN ST  
CITY/ST/ZIP/CO: WINSTON-SALEM, NC 27101-

☐

OFFICER

☒

DIRECTOR

NAME: THOMAS C WAJNERT  
TITLE: DIRECTOR  
ADDRESS: 401 NORTH MAIN ST  
CITY/ST/ZIP/CO: WINSTON-SALEM, NC 27101-

NAME:	JOHN P DALY	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	401 NORTH MAIN ST		
CITY/ST/ZIP/CO:	WINSTON-SALEM, NC 27101-		
NAME:	MARTIN D FEINSTEIN	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	401 NORTH MAIN ST		
CITY/ST/ZIP/CO:	WINSTON-SALEM, NC 27101-		
NAME:	LUC JOBIN	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	401 NORTH MAIN ST		
CITY/ST/ZIP/CO:	WINSTON-SALEM, NC 27101-		
NAME:	H RICHARD KAHLER	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	401 NORTH MAIN ST		
CITY/ST/ZIP/CO:	WINSTON-SALEM, NC 27101-		
NAME:	NANA MENSAH	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	401 NORTH MAIN ST		
CITY/ST/ZIP/CO:	WINSTON-SALEM, NC 27101-		
NAME:	LIONEL L NOWELL III	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	401 NORTH MAIN ST		
CITY/ST/ZIP/CO:	WINSTON-SALEM, NC 27101-		
NAME:	HGL (HUGO) POWELL	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	401 NORTH MAIN ST		
CITY/ST/ZIP/CO:	WINSTON-SALEM, NC 27101-		
NAME:	NEIL R WITHINGTON	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	401 NORTH MAIN ST		
CITY/ST/ZIP/CO:	WINSTON-SALEM, NC 27101-		
NAME:	JOHN J ZILLMER	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	401 NORTH MAIN ST		
CITY/ST/ZIP/CO:	WINSTON-SALEM, NC 27101-		
NAME:	HOLLY K KOEPPPEL	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	401 NORTH MAIN ST		
CITY/ST/ZIP/CO:	WINSTON-SALEM, NC 27101-		
I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.			

<u>/s/ PATRICK Z MESSICK</u>	<u>PATRICK Z MESSICK, ASST</u>	<u>1/10/2012</u>
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	<u>SECRETARY</u> PRINTED NAME AND CORPORATE TITLE	DATE
It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.		